

A PROPOSED CULTIST INITIATIVE LAW

Primary and Final State Elections Will Be Held in California in 1934.—It is not too early to remind the five thousand members of the California Medical Association that primary and final elections will be held for state offices in California in this year, 1934. At these elections it is possible that a number of initiative petitions for enactment of laws by vote of the citizens will also be submitted to the electorate. The draft of one such initiative, which deals with the practice of the healing art, has come to the desk of the editor. It is here reprinted in part, because a perusal of some of its paragraphs should provoke suggestive thought on the task ahead. The naturopathic group had two bills before the last legislature, but each measure died in committee. We have been told that the leaders of the group now propose an initiative law as an easier, even though more costly, means of gaining their ends. What the proponents of this group hope legally to obtain for themselves becomes evident when the following excerpts from the draft are read:

EXCERPTS FROM PROPOSED NATUROPATHIC INITIATIVE

An act to create a public corporation to be known as the "Naturopathic Association of California," to provide for its organization, government, membership and powers, to regulate the practice of naturopathy, and to provide penalties for violation thereof.

Naturopathy is hereby declared to include physiotherapy, physical therapy, phytotherapy, and the use of antiseptics, anesthetics, biochemistry, and the science and art of diagnosis, applied therapeutics and prophylactic hygiene and sanitation, which enables the naturopathic physician to direct, advise, prescribe, dispense and apply food, water, roots, herbs, plants, oils, lights, heat, color, exercises, active and passive manipulations correcting vital tissues, organs or anatomical structures by manual, mechanical, electrical instruments and appliances, x-ray or any and all natural agencies that have been used in the past, that are now in use, or that may be used in the future, to assist nature to restore a physiological and psychological interfunction for the purpose of restoring and maintaining a normal state of health, mentally and physically.

Creates a public corporation to be known as the "Naturopathic Association of California," which shall have perpetual succession with power to sue, enter into contracts, deal in real and personal property, establish and maintain colleges, hospitals, clinics, libraries, and do all things for the advancement of naturopathy.

No law now or hereafter enacted shall qualify, regulate, restrict or prohibit the S. N. A. from fully carrying out, "all the purposes and provisions herein contained."

All jurisdiction over naturopathy is vested in the "Naturopathic Association of California."

Anyone will be considered a member of the Naturopathic Association of California in good standing who complies with provisions Sections 39, 40, 41:

39. Anyone who for one year prior to the effective date has been engaged in some form of drugless practice in California (without requirement that they had been previously licensed).

40. Above, by passing an examination, will be granted right to do minor surgery and give anesthetics.

41. Those who have practiced naturopathy in this State for ten years will be licensed. A governing body of one member from each Congressional District. Members of the Board of Governors elected annually by a system similar to the Bar Association.

63. Naturopathic physicians shall have all the rights and privileges of any and all other practicing physicians of any class in the treatment of any and all diseases, injuries, deformities or other mental or physical conditions. Also same privileges in all "institutions supported wholly or in part by public funds and to disability compensation. . ."

Section 3 states: "No law now or hereafter enacted shall in any way qualify, regulate, or prohibit the State Association from fully carrying out and effectuating all the purposes and provisions herein contained."

THIS AND THAT

San Fernando Plan.—The San Fernando plan of caring for the indigent sick residing in districts somewhat distant from metropolitan centers came into existence in Los Angeles County, and was commented upon in the December CALIFORNIA AND WESTERN MEDICINE, page 417. In that county the physicians in the suburb of San Fernando became dissatisfied with the manner in which a health center curative clinic (maintained in connection with the County Health Department, and to which they were giving gratuitous services), was being conducted. The physicians who were serving in the clinic decided to no longer give such services as a clinic group. Through the county hospital authorities, arrangements were then made to send the indigent sick to the offices of the physicians, a small nominal fee being paid by the county for the use of the offices and facilities of the physicians. It is interesting to note that the clinic staffs in the cities of Long Beach, Compton, Glendale, and Pomona have recently also adopted the San Fernando plan. At Alhambra the attending staff is aiming to follow suit. The health center clinics which are still operating under the old system are those at Inglewood, Santa Monica, Whittier, and Belvedere.

With this wider use of the San Fernando plan, it should shortly be possible to have a clearer estimate, both of the comparative money costs and of the professional merits of the system. In its emphasis on maintenance of the personal physician-patient relationship, the plan makes a real appeal to organized medicine.

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Newspaper Publicity on the Charity Work of Physicians.—On January 11, several Los Angeles newspapers printed interviews with Dr. Harry H. Wilson, secretary of the Los Angeles County Medical Association, in which he discussed at some length the great increase in present-day costs of caring for the indigent sick, and the *Examiner* black-faced the following statement:

"In 1931 it was figured that charity work in the county of Los Angeles amounted annually to ten million dollars, these figures being based on compensation or industrial accident fees, which are considerably less than ordinary fees."

The articles printed were a type of publicity which should find a place in the columns of the lay press, much more than has been the case in the past. The medical profession is paying the price of overgreat modesty in having for so many years refrained from telling what are the approxi-

mate money values of the gratuitous services rendered by physicians in public and private hospitals and clinics. It is hoped that more of such articles and interviews will find space in the newspapers, because their perusal should lead lay citizens to stop and think, and give at least a passing gesture of appreciation to the physicians who make such massive donations to the indigent sick and to the taxpayers. The present-day civilization is one in which propaganda is a powerful force. The medical profession has no wish to engage in cheap advertising, but, on the other hand, it is not necessary, in worship of abstract medical science or ethics, to minimize or keep secret the enormous amount of professional services (and their money valuation) which a host of medical men and women most generously give to the many hospitals and clinics in California.

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Educational Standards of Law and Medicine.—Hon. Chester H. Rowell, prominent California publicist, in his San Francisco *Chronicle* column recently gave expression to some viewpoints on medical and legal curricula and licensure that should be of interest to members of both professions. He spoke, of course, of the standards of nonsectarian, or regular, so-called old-school medicine, and not of cultist groups who, in recent years, through their respective boards, have licensed many practitioners possessing little more than a common school preliminary education, and whose professional training, as given in cultist institutions, was woefully below the standards set by modern scientific medicine. It should be reassuring to note that lay writers have been keen to observe the progress made in medical training during the last twenty-five years. The legal profession is in a splendid position to enforce higher standards, because the State Bar has as its capstone of organization, the Supreme Court of the State, certainly a strategical advantage of real value.

Mr. Rowell's comments follow:

Another educational anomaly.

Forty applicants took the State examination to practice medicine, and thirty-five of them passed.

At the recent State Bar examination the total number of applicants was many times forty, and the vast majority of them failed.

There are States in which, for years, every applicant has passed the medical examination. In practically every State, nearly all of them pass. There is no State in which so many as half the applicants pass the bar examinations, and in some States as many as nine-tenths of them fail.

The difference is not that the medical examination is easier. It is, on the contrary, very much harder. The difference is that all the applicants for entry into the medical profession have received a proper educational preparation, while very few of those applying for the bar examination have done so. These few all pass, most of them at the first trial and the rest at the second.

To try for the medical examination, the aspirant had first to graduate from a university at which his last two years were spent at premedical work, and he had to be one of the few best ones in his class. Then he had to spend four years in a first-class medical school, in which nothing but good work was tolerated. If he lacked the brains, the character, the diligence

or the serious purpose required, that was found out long before he came up for the examination. The failures were weeded out in advance.

Until recently, the candidate for admission to the bar did not have to know anything but law, and he need not have studied that in a first-class school. Now he does have to be a high school graduate or its equivalent. He may have studied his law in a school nearly all of whose graduates habitually fail, and he may have none of the qualities necessary for a lawyer. Nevertheless, he is permitted to waste years of effort, only to be rejected at the end. It is unfair to him and to the State.

Some day the bar itself will demand that the law be a learned profession.

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Great Britain Considering Human Sterilization.—As readers of CALIFORNIA AND WESTERN MEDICINE will recollect, the subject of human sterilization was treated briefly on page 59 of the issue for January. When it was stated that Germany's marked departure from previous methods of handling human beings who are hereditary defectives was almost certain to bring about increased attention elsewhere to the pros and cons of such procedure, it did not occur to us that, within the short period of one month, announcement would be made that the British Government also was considering the desirability of adopting a human sterilization plan; the possibility of which official action adds to the medical interest in a paragraph from *Time*, reading:

German physicians who fail to report patients who ought to be sterilized were threatened last week with a fine of 150 marks (\$56).

The following Associated Press cable from London, dated January 18, gives further information as to what our British cousins are deliberating:

A British Government committee tonight recommended the legalization of voluntary sterilization for mentally defective and some physically defective persons.

The recommendation was made in a report of the committee appointed early last year by the ministry of health for a study of the problem.

The recommendation itself is in the form of a bill for a law which would recommend sterilization of such physical defectives as are shown to be carriers of a grave physical disability which is transmissible.

The bill provides that an operation for sterilization would be performed only under a written authorization by the minister of health.

Applications for the authorization would have to be supported by a recommendation signed by two medical practitioners, one of whom should, if possible, be the patient's family doctor and the other a practitioner on a list approved by the ministers.

Sterilized mental defectives would receive such supervision as required after the operation.

In all cases where a patient is capable of giving his consent, the bill provides he should sign a declaration of his willingness to be sterilized.

CALIFORNIA CHIROPRACTIC ACT—AN IMPORTANT SUPERIOR COURT DECISION

Judge William F. James Hands Down Decision on Scope of California Chiropractic Act.—Just as this February issue of CALIFORNIA AND WESTERN MEDICINE is going to press, the editor has ob-